

# EOHHS Portal Content Submission Form

**Submit all forms and questions via email to the HHS Web Team at  
[hhswebserice@ehs.state.ma.us](mailto:hhswebserice@ehs.state.ma.us)**

Date:	6/16/2009
Agency Name:	dph/bls
Agency Submitter:	Ciranna Bird

Provide URL and breadcrumb of existing page or proposed location.	Detailed Description & Instructions for Publishing	Filename or download, if applicable.
<a href="http://www.mass.gov/?pageID=eoehhs2terminal&amp;L=4&amp;L0=Home&amp;L1=Provider&amp;L2=Reporting+to+the+State&amp;L3=State+Laboratory&amp;sid=Eeoehhs2&amp;b=terminalcontent&amp;f=dph_laboratory_sciences_p_drug_analysis&amp;csid=Eeoehhs2">http://www.mass.gov/?pageID=eoehhs2terminal&amp;L=4&amp;L0=Home&amp;L1=Provider&amp;L2=Reporting+to+the+State&amp;L3=State+Laboratory&amp;sid=Eeoehhs2&amp;b=terminalcontent&amp;f=dph_laboratory_sciences_p_drug_analysis&amp;csid=Eeoehhs2</a>  Home > Provider > Reporting to the State > State Laboratory > Drug Analysis	<input type="checkbox"/> New Page <input checked="" type="checkbox"/> Update <input type="checkbox"/> Delete  Add April 2009 above March 2009	drug_analysis_report_200904.doc
	<input type="checkbox"/> New Page <input type="checkbox"/> Update <input type="checkbox"/> Delete	
	<input type="checkbox"/> New Page <input type="checkbox"/> Update <input type="checkbox"/> Delete	
	<input type="checkbox"/> New Page <input type="checkbox"/> Update <input type="checkbox"/> Delete	

Comments / special instructions (optional):
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## DPH USE ONLY: Director Approval

I authorize the above-mentioned content to be published to the EOHHS Portal.

*NOTE: Approval may also be submitted via email.*

Director or Assistant Director's Approval: \_\_\_\_\_ Date: \_\_\_\_\_

## Please return to:

HHS Web Services Team  
600 Washington Street, 5<sup>th</sup> Floor  
Boston, MA 02111  
Email: [hhswebserice@state.ma.us](mailto:hhswebserice@state.ma.us)